

Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Dennis R. Schrader, Secretary

MARYLAND MEDICAL ASSISTANCE PROGRAM Medical Day Care Transmittal 97 September 1, 2022

TO: Medical Day Care Providers

FROM: Marlana R. Hutchinson, Director MVL

Office of Long Term Services and Supports

Subject: Ability to Pay Schedule FY23 – Medical Day Care Services Only

Note: Please ensure that appropriate staff members in your organization are aware of

the contents of this transmittal.

On July 1, 2022, the Maryland Medical Assistance Program increased the rates for program services rendered to Medicaid participants under Code of Maryland Regulations (COMAR) 10.09.07 by 12 percent as noted in Medical Day Care Transmittal No. 96 (July 1, 2022). This recent rate increase may have resulted in the Medicaid reimbursement rate exceeding the private pay rate for some medical day care (MDC) providers. Please note that the Medicaid payment to a provider may not exceed the lesser of the per diem rate and the provider's customary charge to the general public, unless based upon an approved sliding fee schedule.

Please find attached the Fiscal Year 2023 Ability to Pay Schedule to be utilized when calculating the payment due for private pay participants.

If you have any questions regarding this transmittal, please contact Alisa Jones, Division of Community Long Term Care at (410) 767-3014 or <u>alisa.jones@maryland.gov</u>.

OFFICE OF LONG TERM SERVICES & SUPPORTS ABILITY TO PAY SCHEDULE FY 2023 (MEDICAL DAY CARE SERVICES ONLY)

EFFECTIVE 07/1/2022

GROSS ANNUAL INCOME		2	NUMBER OF FAMILY MEMBERS					
BOTTOM	TOP	-	1	2	3	4	5	_
0	7,320	_		MAY BE	ELIGIBL	E FOR ME	DICAL AS	SISTANCE
7,321	7,710				_			
7,711	8,610							
8,611	9,886						_	
9,887	10,750	13,710						MEDICAL ASSISTANCE
10,751	11,760							LINE
11,761	13,590	_	10%]	FEDER	AL		
13,591	15,164		20%			POVER	ГҮ	
15,165	16,739		30%		_		LEVEL	
16,740	18,310		40%	30%				
18,311	20,670		50%	40%				
20,671	23,030		60%	50%	40%			
23,031	27,750		70%	60%	50%	40%	7	
27,751	32,470		80%	70%	60%	50%	40%	_
32,471	37,190		90%	80%	70%	60%	50%	
37,191	41,910		100%	90%	80%	70%	60%	
41,911	46,630		100%	100%	90%	80%	70%	
46,631	51,350		100%	100%	100%	90%	80%	
51,351	56,070		100%	100%	100%	100%	90%	
56,071	60,790		100%	100%	100%	100%	100%	

NO ONE WILL BE DENIED SERVICE DUE TO INABILITY TO PAY.

THE FEE AS DETERMINED BY THIS ABILITY TO PAY SCALE SHALL BE THE PERCENTAGE APPLIED TO THE RATE PER DAY AS ESTABLISHED BY THE DIVISION OF COST ACCOUNTING & REIMBURSEMENT

A THERAPEUTIC FEE OF \$6.00 FOR A DAY OF CARE MAY BE ASSESSED FOR PARTICIPANTS TO BE SERVED UNDER THE OFFICE OF LONG TERM SERVICES AND SUPPORTS FUNDING AGREEMENTS.